

FORM APPROVED
OMB NO. 0579-0036

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA
include Zip Code)
Arizona State University
Dept. of Animal Care & Technologies
Tempe, AZ 85287
480/965-4385

[illegible]

ASSURANCE STATEMENTS

- 1). Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2). Each principal investigator has considered alternatives to painful procedures.
- 3). This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4). The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

لایق

DATE SIGNED

10/4/01

ATTACHMENT TO ANNUAL REPORT OF RESEARCH FACILITY

November 15, 2004
Arizona State University
Department of Animal Care & Technologies

Facility Locations where USDA covered animal are located:

Life Sciences B
Life Sciences C
Schwada Classroom Office Building
Price Road Facility

NOV 12 2004

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 86-R-0005
CUSTOMER NUMBER: 1045

FORM APPROVED
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

Northern Arizona University
Biological Sciences Annex
Box 4130
Flagstaff, AZ 86011

Telephone: (928) -523-4880

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

Biological Sciences Annex
Coconino County, Kiabab Plateau

FACILITY LOCATIONS (Sites) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A)

A. Animals Covered By The Animal Welfare Regulations	B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use o pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasc such drugs were not used must be attached to this report	F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E)
4. Dogs					
5. Cats					
6. Guinea Pigs					
7. Hamsters					
8. Rabbits					
9. Non-human Primates					
10. Sheep					
11. Pigs					
12. Other Farm Animals					
13. Other Animals					
Cougar		3			3
Striped skunk		28			28
Cottontail sp.		1			1

ASSURANCE STATEMENTS

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- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and app: Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary in: brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL
(Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED

11-5-04

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. REGISTRATION NO.

86-R-0005

FORM APPROVED
OMB NO. 0579-0036

CONTINUATION SHEET FOR ANNUAL REPORT
OF RESEARCH FACILITY
(TYPE OR PRINT)

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code)

Northern Arizona University - Bio Science Annex
Box 4130
Flagstaff, AZ 86011
(928) 523-4880

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use this form.)

A. Animals Covered By The Animal Welfare Regulations ----- 12. &/OR 13. Other (List by species)	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain- relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to this report).	F TOTAL NO. OF ANIMALS (Cols. C + D + E)
black-tailed jackrabbit		16			16
gollon Vole		26			26
er Mouse		368			368
ush Mouse		120			120
rvest Mouse		8			8
nyon Mouse		112			112
ng-tailed Mouse		48			48
ouse Mouose		4			4
anyon Mouse		151			151
actus Mouse		184			184
hite-footed Mouse sp.		17			17
hipmunk Sp.		2			2
rey-collared Chipmunk		7			7
liff Chipmunk		8			8
hite-throated Woodrat		4			4
rizona Woodrat		8			8
esert Woodrat		163			163
tephen's Woodrat		5			5
exican Woodrat		3			3

ASSURANCE STATEMENTS

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CERTIFICATION BY HEADQUARTES RESEARCH FACILITY OFFICIAL
(Chief Executive Officer or Legally Responsible Institutional Official)

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL

DATE SIGNED

11-5-04

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. REGISTRATION NO.

86-R-0005

FORM APPROVED
OMB NO. 0579-0036

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code)

Northern Arizona University
Biological Sciences Annex
Box 4130
Flagstaff, AZ 86011
(928) 523-4880

CONTINUATION SHEET FOR ANNUAL REPORT
OF RESEARCH FACILITY
(TYPE OR PRINT)

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use this form.)

A. Animals Covered By The Animal Welfare Regulations ----- 12. &/OR 13. Other (List by species)	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain- relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to this report).	F. TOTAL NO. OF ANIMALS (Cols. C + D + E)
Antelope Ground Squirrel		1			1
White-tailed antelope squirrel		13			13
Morris' antelope Squirrel		2			2
Black Squirrel		2			2
Blacky Pocket Mouse		5			5
San Diego Pocket Mouse		19			19
Black Pocket Mouse		25			25
Desert Pocket Mouse		72			72
Gray Pocket Mouse		4			4
Blacket Mouse sp.		17			17
Arizona Pockets Mouse		35			35
Paints Pocket Mouse		2			2
White Pocket mouse		67			67
Great basin Pocket Mouse		9			9
Hamant Kangaroo Rat		1			1
Desert Kangaroo Rat		15			15
Merriam's Kangaroo Rat		158			158
Northern Grasshopper Mouse		2			2
Southern Grasshopper Mouse		4			4

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CERTIFICATION BY HEADQUARTES RESEARCH FACILITY OFFICIAL
(Chief Executive Officer or Legally Responsible Institutional Official)

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

DATE SIGNED

11-5-04

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. REGISTRATION NO.
86-R-0005

FORM APPROVED
OMB NO. 0579-0036

CONTINUATION SHEET FOR ANNUAL REPORT
OF RESEARCH FACILITY
(TYPE OR PRINT)

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code)
Northern Arizona University
Biological Sciences Annex
Box 4130
Flagstaff, AZ 86011
(928) 523-4880

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use this form.)

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain- relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to this report).	F. TOTAL NO. OF ANIMALS (Cols. C + D + E)
12. &OR 13. Other (List by species)					
allis Bat		135			135
ownsend's Big-eared Bat		1			1
g Brown Bat		30			30
stern Mastiff Bat		1			1
ary Bat		6			6
lifornia Myotis		16			16
stern Small-footed Myotis		11			11
ng-eared Myotis		2			2
izona Myotis		1			1
inged Myotis		3			3
ng-legged Myotis		7			7
ma Myotis		4			4
g Free-tailed Bat		4			4
stern Pipistelle		93			93
xican Free-tailed bat		10			10
otis		1			1
ilver-haired Bat		1			1
ttle brown Myotis		1			1

ASSURANCE STATEMENTS

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CERTIFICATION BY HEADQUARTES RESEARCH FACILITY OFFICIAL
(Chief Executive Officer or Legally Responsible Institutional Official)

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL

DATE SIGNED

11-5-04

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 86-R-0006
CUSTOMER NUMBER: 1049

FORM APPROVED
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

Catholic Healthcare West II
St. Joseph Hos & Med. Ctr./Barrow Neur. Inst.
350 West Thomas Rd.
Phoenix, AZ 85013

Telephone: (602) -406-3000

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A)

A. Animals Covered By The Animal Welfare Regulations	B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasc such drugs were not used must be attached to this report	F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E)
4. Dogs	3	0	9	0	9
5. Cats	8	2	20	0	22
6. Guinea Pigs	0	0	0	0	0
7. Hamsters	0	0	0	0	0
8. Rabbits	0	0	0	0	0
9. Non-human Primates	11	0	31	0	31
10. Sheep	0	0	0	0	0
11. Pigs	5	0	136	0	136
12. Other Farm Animals	0	0	0	0	0
13. Other Animals					

ASSURANCE STATEMENTS

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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL
(Chief Executive Officer or Legally Responsible Institutional Official)

DATE SIGNED
11-22-04

NOV 29 2004

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 86-R-0009
CUSTOMER NUMBER: 1051

FORM APPROVED
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

W. L. Gore & Associates, Inc.
1505 N. Fourth Street
Flagstaff, AZ 86001

Telephone: (928) -526-3030

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A)

A. Animals Covered By The Animal Welfare Regulations	B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasc such drugs were not used must be attached to this report	F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E)
4. Dogs	18	0	149	0	149
5. Cats	0	0	0	0	0
6. Guinea Pigs	0	0	0	0	0
7. Hamsters	0	0	0	0	0
8. Rabbits	0	0	122	0	122
9. Non-human Primates	0	0	0	0	0
10. Sheep	1	0	16	0	16
11. Pigs	2	0	113	0	113
12. Other Farm Animals	0	0	0	0	0
13. Other Animals	0	0	0	0	0

ASSURANCE STATEMENTS

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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL
(Chief Executive Officer or Legally Responsible Institutional Official)

DATE SIGNED

11/10/04

(AUG 91)

(replaces VET FORM 10-23 (OCT 88), which is obsolete.)

NOV 12 2004

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)	1. CERTIFICATE NUMBER: 86-R-0022 CUSTOMER NUMBER: 1058	FORM APPROVED OMB NO. 0579-0036
	Primate Foundation Of Arizona P. O. Box 20027 Mesa, AZ 85277 Telephone: (480) -832-3780	

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY-LOCATIONS (Sites) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A)

A. Animals Covered By The Animal Welfare Regulations	B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use o pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reas such drugs were not used must be attached to this report	F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E)
4. Dogs					
5. Cats					
6. Guinea Pigs					
7. Hamsters					
8. Rabbits					
9. Non-human Primates		73			73
10. Sheep					
11. Pigs					
12. Other Farm Animals					
13. Other Animals					

ASSURANCE STATEMENTS

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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL	
SIGN.	TE SIGNED 9/25/04

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OCT 1 2004

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 86-R-0030
CUSTOMER NUMBER: 1275

FORM APPROVED
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

Alcor Life Extension Foundation
7895 E. Acoma Drive, Ste 110
Scottsdale, AZ 85260

Telephone: (480) -905-1906

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Attached Listing

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4. Dogs	0	0	0	0	0
5. Cats	0	0	0	0	0
6. Guinea Pigs	0	0	0	0	0
7. Hamsters	0	0	0	0	0
8. Rabbits	0	0	0	0	0
9. Non-human Primates	0	0	0	0	0
10. Sheep	0	0	0	0	0
11. Pigs	0	0	0	0	0
12. Other Farm Animals	0	0	0	0	0
13. Other Animals	0	0	0	0	0

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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL
(Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED

9/22/04

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 86-R-0033
CUSTOMER NUMBER: 15053

FORM APPROVED
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

Pima Community College, East Campus
8181 East Irvington Road
Tucson, AZ 85709

Telephone: (520) -206-7414

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A)

A. Animals Covered By The Animal Welfare Regulations	B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquiliz- ing drugs would have adversely affected the procedures, res- ults or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reason such drugs were not used must be attached to this report)	F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E)
4. Dogs		1	9		10
5. Cats		1	7		8
6. Guinea Pigs					
7. Hamsters					
8. Rabbits					
9. Non-human Primates					
10. Sheep					
11. Pigs					
12. Other Farm Animals					
13. Other Animals					

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL
(Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED

11/22/04

NOV 26 2004

OCT 15 2004

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 86-R-0033
CUSTOMER NUMBER: 15053

FORM APPROVED
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

Pima Community College, East Campus
8181 East Irvington Road
Tucson, AZ 85709

Telephone: (520) -206-7414

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A)

A. Animals Covered By The Animal Welfare Regulations	B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, or experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquiliz- ing drugs would have adversely affected the procedures, res- ults or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to this report)	F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E)
4. Dogs		1	9		10
5. Cats		1	7		8
6. Guinea Pigs					
7. Hamsters					
8. Rabbits					
9. Non-human Primates					
10. Sheep					
11. Pigs					
12. Other Farm Animals					
13. Other Animals					

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
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- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL
(Chief Executive Officer or Legally Responsible Institutional Official)

AL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED

4/11/04

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)	1. CERTIFICATE NUMBER: 86-R-0034 CUSTOMER NUMBER: 3442	FORM APPROVED OMB NO. 0579-0036
	Arizona-Sonora Desert Museum 2021 N. Kinney Rd. Tucson, AZ 85743 Telephone: (520) -883-1380	

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A)

A. Animals Covered By The Animal Welfare Regulations	B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reas such drugs were not used must be attached to this report	F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E)
4. Dogs	0	0	0	0	0
5. Cats	0	0	0	0	0
6. Guinea Pigs	0	0	0	0	0
7. Hamsters	0	0	0	0	0
8. Rabbits	0	0	0	0	0
9. Non-human Primates	0	0	0	0	0
10. Sheep	0	0	0	0	0
11. Pigs	0	0	0	0	0
12. Other Farm Animals	0	0	0	0	0
13. Other Animals	5	5	0	0	5
California leaf nose bats					

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese: teaching, testing, surgery, or experimentation were followed by this research facility.
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- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional Official)		
SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL	NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)	DATE SIGNED <i>10/5/04</i>

NOT - 6

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. REGISTRATION NO.

86-V-002

FORM APPROVED
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code)

Southern AZ VA Health Care System
Research Service Line (0-151)
3601 S. 6th Ave.
Tucson, AZ 85723

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets if necessary.)

FACILITY LOCATIONS (Sites)

ARF - Bldg. 56, Bldg. 10 - Research Labs

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS FORM 7023A)

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted - involving no pain, distress, or use of pain- relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to this report).	F. TOTAL NO. OF ANIMALS (Cols. C + D + E)
4. Dogs	0	0	0	0	0
5. Cats	0	0	0	0	0
6. Guinea Pigs	0	0	0	0	0
7. Hamsters	0	0	0	0	0
3. Rabbits	0	0	0	0	0
9. Non-human Primates	0	0	0	0	0
10. Sheep	0	0	0	0	0
11. Pigs	0	0	0	0	0
12. Other Farm Animals	0	0	0	0	0
13. Other Animals					
Rats	0	0	811	0	811
Mice			49	0	49

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL
(Chief Executive Officer or Legally Responsible Institutional Official)

I certify that the above is true, correct, and complete (7 USC Section 2143)

DEC - 1 2004

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

L (Type or Print)

DATE SIGNED

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. REGISTRATION NO.

86-V-002

FORM APPROVED
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code)

Southern AZ VA Health Care System
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4. Dogs	0	0	0	0	0
5. Cats	0	0	0	0	0
6. Guinea Pigs	0	0	0	0	0
7. Hamsters	0	0	0	0	0
8. Rabbits	0	0	0	0	0
9. Non-human Primates	0	0	0	0	0
10. Sheep	0	0	0	0	0
11. Pigs	0	0	0	0	0
12. Other Farm Animals	0	0	0	0	0
13. Other Animals					
Rats	0	0	811	0	811
Mice			49	0	49

ASSURANCE STATEMENTS

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CERTIFICATION BY HEADQUARTES RESEARCH FACILITY OFFICIAL
(Chief Executive Officer or Legally Responsible Institutional Official)

I certify that the above is true, c

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

(Type or Print)

DATE SIGNED

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